

# TRANSMITTAL FORM

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Confirmation No.	3452
Application Number	10/597,590
Filing Date	July 31, 2006
First Named Inventor	Ira Sanders
Group Art Unit	3772
Examiner Name	Victoria J. Hicks
Patent No.	Not yet assigned
Issue Date	Not yet assigned

## ENCLOSURES (check all that apply)

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| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Check Attached<br><input type="checkbox"/> Copy of Fee Transmittal<br><input checked="" type="checkbox"/> Amendment/Response<br><input type="checkbox"/> Preliminary<br><input checked="" type="checkbox"/> Non-Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> After Allowance<br><input type="checkbox"/> Terminal Disclaimer<br><input checked="" type="checkbox"/> Petition for Extension of Time<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Form PTO-1449<br><input type="checkbox"/> Copies of IDS Citations<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Sequence Listing submission<br><input type="checkbox"/> Paper Copy/CD<br><input type="checkbox"/> Computer Readable Copy<br><input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal<br><input type="checkbox"/> Transmittal of Replacement Drawing(s)<br><input type="checkbox"/> Replacement Drawing(s)<br><input type="checkbox"/> Executed Declaration for Utility or Design Patent Application<br><input type="checkbox"/> Executed Power of Attorney to Prosecute Patent Applications Before the USPTO with Copy of Executed Assignment Document<br><input type="checkbox"/> Revocation of Power of Attorney With New Power of Attorney and Change of Correspondence Address<br><input type="checkbox"/> CD(s) for large table or computer program | <input type="checkbox"/> Request for Certificate of Correction<br><input type="checkbox"/> Certificate of Correction<br><input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences<br><input type="checkbox"/> Appeal Brief<br><input type="checkbox"/> Status Inquiry<br><input type="checkbox"/> Return Receipt Postcard<br><input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8<br><input type="checkbox"/> Additional Enclosure(s) (please identify below) |
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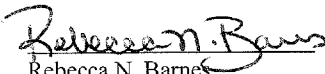
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